FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed 010 JUL 20 AM 8: 36 electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

COMMITTEE NAME (Must be same as on Statement of Orga	unization)		
Smith for Senate	in Zawii)	lr	FORM
IMPORTANT: Indicate by # type of committee you are reporting for: (1)Statewide/Legislative/Judge Standing for Retention Candidate (2) (4)County Central Committee (5)County Candidate (6)City Candid Subdivision Candidate (8)County PAC (9)City PAC (10)School E11) Local Ballot Issue	2)State PAC (3)State Party	' (<u> </u>	DR-2 (Rev. 12/2009) For Office Use Only Comm. #
CANDIDATE COMMITTEES ONLY: Candidate Name Roby Smith Office Sought	Political Party (if applicable) Republican District (if Senate or House)		Logged In Scanned Computer
State Senate	41		Audited
Late reports are subject to possible civil and criminal penalties. Purcandidate's committee end the chairperson, for any other type of constitution of the chairperson of the chairperso	suant to lowa Code sections 68B.32A committee, is the individual responsible $563 - 286 - 0179$ TELEPHONE	(7) and 68 for filing	3A.401(3), the candidate, for a timely and accurate reports. 3A.401(3), the candidate, for a timely and accurate reports.
I AM FILING A July 14, 2010	REPORT FOR (1) ELECTION	/(2)NON	-ELECTION YEAR.
(report date)	Indicate by		
CHECK IF AMENDMENT TO REPORT DATED		Local Con	nmittees, enter Date of Election
☐ Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.			Local Committees, enter County in ction is held
STATEMENT OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (Tot committee. This amount MUST be the same as the confidence of the last reporting period or must be zero if this is fire.)	ash on hand at the end	\$	3,327.26
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedu	ıle A) (*also see in-kind below)		9,545.00
Schedule F: Loans Received total (Attach Schedule I	F)		
Schedule H: Total Sales of Campaign Property (Attac			
(Schedule H applies to Candidates' Comm			12,872.26
	SUB-TOTAL	\$	12,872.20
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule			7,856.26
CASH ON HAND at the end of this reporting period (if final repo	,		5,016.00
**UNPAID BILLS (From Schedule D - Attach Schedule D)			7,700.00
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched			2,375.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule			2,200.00
CONSULTANT BREAKDOWN (Schedule G Attached?)	,		YES✓_NO
CANDIDATE COMMITTEES ONLY:		_	<u> </u>

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(Rev. 07/03)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF NDING FORM
Smith for Senate	, , , , ,	ABINOT ONIV

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
6/3/2010	ID#	Debra Guyette 4331 Wittman Dr Davenport, IA 52806		\$25.00	
6/3/2010	ID# CK#	Richard Peet 1717 N Russell Pampa, TX 79065		50.00	
6/4/2010	ID# CK#	Douglas Schara 1025 Braden Chariton, IA 50049		200.00	
6/4/2010	ID# CK#	Paul Smith 1678 Deer Springs Cir Bettendorf, IA 52722		100.00	
6/4/2010	ID# CK#	Edward Friedmann PO Box C Redfield, IA 50233		500.00	
6/ \$ 2010	ID# CK#	Scott Lindholm 4741 Spring St Davenport, IA 52807		500.00	
6/ § 2010	ID#	Elizabeth Helmich 2415 Fulton Ave Davenport, IA 52803		45.00	
6/ § 2010	ID# CK#	Micah Parker 1181 Versailles Cir Riverside, CA 92506		50.00	
6/ § /2010	ID# CK#	Frances Meyer 10527 driver Ave St. Louis, MO 63114		25.00	
6/3/2010	ID# CK#	Hovey Tinsman 3541 E Kimberly Rd Davenport, IA 52807		1000.00	
			SUB-TOTAL	2405.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

TOTAL (if last page of this schedule)

SCHEDULE

MONETARY

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(Rev. 07/03)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Smith for Senate		CK THIS BOX IF NDING FORM
	L	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	ID#				INCOME
6/7/2010	CK#	Harry Cockrell 8320 N Harrison St Davenport, IA 52806		\$5000.00	
	ID#	2 a. chport, HT 32000	_		
6/17/2010	CK#	Curt Beason 220 N Main St Davenport, IA 52801		100.00	
	ID#		- 		
6/29/2010	CK#	Kerry Beyer 2725 E 65th Street Davenport, IA 52807		150.00	
	ID#				
7/14/2010	CK#	Susan Jensen 1350 W 49th Street		500.00	
	ID#	Davenport, IA 52806			
7/14/2010	CK#	Mark Kilmer 2345 Fairhaven Rd Davenport, IA 52803		500.00	
	ID#	Davenport, IA 52803			_
7/12/2010	CK#	David Schiltz 6404 Woodland Ct Davenport, IA 52807		750.00	
	ID#				
7/13/2010	CK#	Unitemized Contribution		50.00	
	ID#				
	CK#				
	ID#				
] []
	CK#				
	ID#				
	CK#			i	
	<u> </u>	1	SUB-TOTAL		
			OOD-TOTAL	7050 00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 2 (for Schedule A)

7050.00

9545.00

TOTAL (if last page of this schedule)

MONETARY

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be	same as on	Statement of C	Organization)
Smith for Senate			

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
6/7/2010	ID# CK#	Victory Store 2200 SW 30th Street Davenport, IA 52802	Yard Signs	\$ 214.00
	ID#	Victory Enterprises	Literature pieces	
6/7/2010	CK#	2200 SW 30th Street Davenport, IA 52802		1869.91
	ID#	Victory Store	Auto Calls	
6/7/2010	CK#	2200 SW 30th Street Davenport, IA 52802		584.14
	ID#	Victory Store	Mailings	
6/7/2010	CK#	2200 SW 30th Street Davenport, IA 52802		\$4814.52
	ID#	Victory Store	T-shirts and stickers	
7/1/2010	CK#	2200 SW 30th Street Davenport, IA 52802		\$370.99
	ID#	Victory Store	Credit Card Donation Charge	
6/10/2010	Ск#	2200 SW 30th Street Davenport, IA 52802	Coton out 2 on the control of the coton	\$2.70
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TOTAL	\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	1	of	1
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\$ 7856.26

TOTAL (if last page of this schedule)

COMMITTEE NAME (Must be same as on Statement of Organization)	INCURRED INDEBTEDNESS
NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.	CK THIS BOX MENDING M

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice

DATE		has be	en received.
INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
6/5/2010	Roby Smith 2036 E 48th Street Davenport, IA 52807	commercial advertising	7,700.00
- 111		SUB-TOTAL	\$
	TOTAL DEBTS OWED BY COMMITTEE AT	THE END OF THIS REPORTING PERIOD	\$ 7,700.00
*If actual figure is	unknown, show "estimated" beside the figure.	Pag	e of

(for Schedule D)

CANDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTR	RUCTIONS	SEE DACK	OF FORK
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COMMITTEE NAME (Must be same as on Statement of Organization) Smith for Senate	SCHEDULE E (Rev. 06/97)	IN-KIND
		K THIS BOX IF DING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
6/4/2010	Jeff Lyle 5002 Lorton Ave Davenport, IA 52807		production cost of commercial	\$ 350.00	
7/2/2010	Roby Smith 2036 E 48th Street Davenport, IA 52807	self	candy for parade	25.00	
6/4/2010	Roby Smith 2036 E 48th Street Davenport, IA 52807	self	commercial advertising	2,000.00	
			SUB-TOTAL	\$	
			TOTAL (if last page of this schedule)	\$ 2,375.00	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule E)

COMMITTEE NAME(Must Smith for Senate	st be same as on Statement of Organization)		SCHEDULE F (Rev. 02/08)	LOANS RECEIVED & REPAID
OTAL UNPAID LOANS	FROM LAST REPORTING PERIOD \$ 2,200.00 DANS RECEIVED THIS REPORTING PERIOD		AMENDIN	
(Original Goulde	of loan, such as a bank, must be shown if a third party is	s involved. Include loans from candid	late's personal fu	ınds.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*	AMOUNT O	F LOAN

TOTAL (PART I)

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD (Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$

TOTAL CASH REPAYMENTS (PART II)

From Schedule E -- TOTAL LOANS FORGIVEN

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

Page_1	of _1
	(for Schedule E)

\$ 2,200.00